REMARKS

Claims 1-28 are currently pending in this application. Reconsideration is respectfully requested in light of the above amendments and the following remarks.

The Examiner objected to the specification for various informalities. Applicant has amended the specification in accordance with the Examiner's suggestion and respectfully request that this objection be withdrawn.

The Examiner rejected claims 1-28 under 35 U.S.C. § 102(b) as being anticipated by U.S. Patent 6,370,431 to Stoop et al. Applicant respectfully traverses this rejection.

Applicant's claimed invention as recited in independent claims 1, 13, 17, 23 and 27 is directed toward a method and corresponding apparatus for detecting and preventing ventricular arrhythmias. For example, independent claim 1 recites a method comprised in part by determining a difference between morphologies of at least two PVCs and determining whether to deliver preventive therapy based on a comparison of the difference between morphologies and a threshold. (Underlining added for emphasis only). Applicant respectfully submits that Stoop et al. do not disclose or suggest the recited claim elements.

Rather Stoop et al. disclose a pacemaker system and method for analyzing patient QT information on an ongoing basis, and for determining the occurrence of statistically significant changes in a plurality of QT parameters, thereby providing an accurate determination of when torsades de pointes (TdP) or other VT is indicated.

For example, Stoop et al. compare the current QT interval with a compiled mean value of the QT interval for an appropriate rate, and determine whether the QT interval has increased by more than twice the

standard deviation of the mean. In other embodiments Stoop et al. perform similar calculations for QT dispersion and the time derivative of QT changes in T-wave amplitude and morphology.

Additionally, the pacemaker of Stoop et al determines whether a ventricular extra systole (VES) has occurred, and if so, what has been the recent rate of occurrence of VESs. This data is used to calculate whether pacing at an intervention rate above the patient's natural rate is indicated, and if so how to adjust the intervention rate. By this means, the pacemaker system provides overdrive pacing which is accurately responsive to cardiac conditions representative of ventricular tachycardia, like TdP, or another dangerous ventricular arrhythmia. (Stoop et al., col. 2, lines 34-47).

Thus Stoop et al. analyze the rate of occurrence of PVCs not the morphology difference between PVCs as recited in Applicant's claimed invention to determine if pacing at an intervention rate is indicated. Accordingly, Applicant respectfully submits that claims 1, 13, 17, 23 and 27 are novel and unobvious over Stoop et al. and are therefore allowable. Applicant further submits that claims 2-12, claims 14-16, claims 18-22, claims 24-26 and claim 28 that depend from claims 1, 13, 17, 23 and 27 respectively are allowable as are claims 1, 13, 17, 23 and 27 and for additional limitations recited therein.

Accordingly, Applicant respectfully submits that the present application is in condition for allowance. If the Examiner believes a telephone conference would expedite or assist in the allowance of the present application, the Examiner is invited to call Peter Nichols at (818) 493-2323.

Pursuant to 37 C.F.R. 1.136(a)(3), Applicant hereby requests and authorizes the U.S. Patent and Trademark Office to (1) treat any concurrent or future reply that requires a petition for extension of time as incorporating a petition for extension of time for the appropriate length of time and (2)

charge all required fees, including extension of time fees and fees under 37 C.F.R. 1.16 and 1.17, to Deposit Account No. 22-0265.

Respectfully submitted,

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